

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>		01/06/2000
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	32	1/18/00
FORMALITY REVIEW	DMK	69169	1-31-00
RESPONSE FORMALITY REVIEW	11	11	4-12-00

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 - ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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AVAILABLE COPY

If more than 150 claims or 10 actions  
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